

*IN THE UNITED STATES PATENT AND TRADEMARK OFFICE*

Applicant: Masahiro SHIOTANI et al.  
Title: SEAT BELT RETRACTOR  
Appl. No.: Unassigned  
Filing Date: Herewith  
Examiner: Unassigned  
Art Unit: Unassigned

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Commissioner for Patents  
Box PATENT APPLICATION  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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[ ] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

[ X ] Specification, Claim(s), and Abstract (17 pages).

11/06/01



09/985924-110601

- ☒ Informal drawings (7 sheets, Figures 1-7).
- ☒ Executed Declaration and Power of Attorney (4 pages).
- ☒ Assignment of the invention to TAKATA CORPORATION.
- ☒ Assignment Recordation Cover Sheet.
- ☒ Check in the amount of \$40.00 for Assignment recordation.
- ☒ Claim for Convention Priority with Priority Document No. JP2000-337391
- ☐ Small Entity statement.
- ☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- ☒ Information Disclosure Statement.
- ☒ Form PTO-1449 with copies of 12 listed reference(s). (14 Refs listed)
- ☐ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$740.00	\$740.00
Total Claims:	8	- 20	= 0	x \$18.00	= \$0.00
Independents:	2	- 3	= 0	x \$84.00	= \$0.00
If any Multiple Dependent Claim(s) present:			+	\$280.00	= \$0.00
				SUBTOTAL:	= \$740.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):					= \$0.00
				TOTAL FILING FEE:	= \$740.00

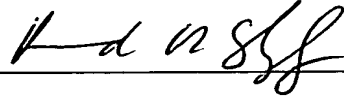
- ☒ A check in the amount of \$740.00 to cover the filing fee is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: November 6, 2001

By



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